

FORM 5. INVOLUNTARY PETITION

If a child support creditor or its representative is a petitioner, and if the petitioner files the form sp Reform Act of 1994, no fee is required.

Name of Debtor K&R Express Systems, Inc.

FORM 5 Involuntary Petition
(6/92)

Case No. _____
(court use only)

TRANSFER OF CLAIM

☐ Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents evidencing the transfer and any statements that are required under Bankruptcy Rule 1003(a).

REQUEST FOR RELIEF

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X Robert A. Coco / KRM
Signature of Petitioner or Representative (State title)

Central States, Southeast and Southwest **April 15, 2004**
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity
Robert A. Coco, Associate Gen'l Counsel
9377 West Higgins Road
Rosemont, IL 60018-4938

X Peter Swenson / KRM
Signature of Petitioner or Representative (State title)

Local 705 International Brotherhood of **April 15, 2004**
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity
1645 West Jackson
Chicago, IL 60612

X Peter Swenson / KRM
Signature of Petitioner or Representative (State title)

Local 705 International Brotherhood of **April 15, 2004**
Name of Petitioner Date Signed

Name & Mailing Address of Individual Signing in Representative Capacity
1645 West Jackson
Chicago, IL 60612

X G. H. C. **April 15, 2004**
Signature of Attorney Date

Shaw Gussis Fishman Glantz Wolfson & Tow

Name of Attorney Firm (If any)
c/o Kathleen H. Klaus
321 North Clark Street
Suite 800
Chicago, IL 60610

Address

Telephone No. **312-541-0151**

X G. H. C. **April 15, 2004**
Signature of Attorney Date

Shaw Gussis Fishman Glantz Wolfson & Tow

Name of Attorney Firm (If any)
c/o Kathleen H. Klaus
321 North Clark Street
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Address

Telephone No. **312-541-0151**

PETITIONING CREDITORS

Name and Address of Petitioner Central States, Southeast and Southwest Areas Pension Fund	Nature of Claim delinquent fringe benefit contribution	Amount of Claim 255,569.90
Name and Address of Petitioner Local 705 International Brotherhood of Teamsters Health and Welfare Fund 1645 W. Jackson Chicago, IL 60612	Nature of Claim delinquent fringe benefit contribution	Amount of Claim 32,384.00
Name and Address of Petitioner Local 705 International Brotherhood of Teamsters Pension Fund 1645 W. Jackson Chicago, IL 60612	Nature of Claim delinquent fringe benefit contribution	Amount of Claim 42,861.36
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims 330,815.26

0 continuation sheets attached